

ISSUE SLIP STAPLE AREA (for additional cross references)

09/885,319

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S. Z		06-22-01
O.I.P.E. CLASSIFIER		43	7/3/01
FORMALITY REVIEW	MV	778	8/11/01
RESPONSE FORMALITY REVIEW	CK	1109	12-31-01

INDEX OF CLAIMS

✓ ..... Rejected  
 u ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	12/26/2002
2	✓	✓	19/Nov/2002
3	✓	✓	4/Jan/2003
4	✓	✓	28/Jan/2003
5	✓	✓	17/Mar/04
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
13	✓	✓	
14	✓	✓	
15	✓	✓	
16	✓	✓	
17	✓	✓	
18	✓	✓	
19	✓	✓	
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41	✓	✓	
42	✓	✓	
43	✓	✓	
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45	✓	✓	
46	✓	✓	
47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	17/Mar/04
52	✓	✓	19/Nov/2002
53	✓	✓	4/Jan/2003
54	✓	✓	28/Jan/2003
55	✓	✓	17/Mar/04
56	✓	✓	
57	✓	✓	
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97	✓	✓	
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99	✓	✓	
100	✓	✓	

Claim	Final	Original	Date
101	✓	✓	
102	✓	✓	
103	✓	✓	
104	✓	✓	
105	✓	✓	
106	✓	✓	
107	✓	✓	
108	✓	✓	
109	✓	✓	
110	✓	✓	
111	✓	✓	
112	✓	✓	
113	✓	✓	
114	✓	✓	
115	✓	✓	
116	✓	✓	
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119	✓	✓	
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139	✓	✓	
140	✓	✓	
141	✓	✓	
142	✓	✓	
143	✓	✓	
144	✓	✓	
145	✓	✓	
146	✓	✓	
147	✓	✓	
148	✓	✓	
149	✓	✓	
150	✓	✓	

If more than 150 claims or 10 actions  
staple additional sheet here

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